


Attorney Docket No.: 1010/1006959-US4

# Certificate of Express Mailing Under 37 CFR 1.10

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

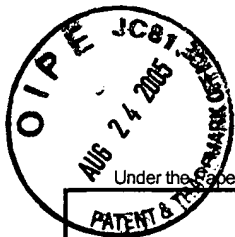
on August 24, 2005  
Date

  
\_\_\_\_\_  
Signature

Lillian Garcia  
\_\_\_\_\_  
Typed or printed name of person signing Certificate

**Note:** Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal (1 page);  
Notice of Appeal (1pg)  
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1  
page);  
Check in the amount of \$1,520.00 (Check No. **9527**); and  
Return postcard.



PTO/SB/21 (09-04)  
Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	08/469,492-Conf. #6384
	Filing Date	June 6, 1995
	First Named Inventor	Howard L. Weiner
	Art Unit	1645
	Examiner Name	P. A. Duffy
Total Number of Pages in This Submission	Attorney Docket Number	01010/1006959-US4

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	DARBY & DARBY P.C.	
Signature		
Printed name	Michael J. Sullivan	
Date	August 24, 2005	Reg. No. 54,479

Express Mail Label No.	Dated: _____
------------------------	--------------